

RISKS AND VULNERABILITIES OF CHILDREN IN ZAMBIA: MOOTING RESPONSIVE SOCIAL PROTECTION INTERVENTIONS
Fred Moonga, Sulina Green

Social protection has not only assumed another dimension characterised by income transfers, but has also aroused intense interest among researchers, policy makers and practitioners. In spite of this development, and its evident effectiveness in averting poverty, risks and vulnerabilities, interventions for children have been disappointingly limited. This study attempts to review the literature on the risks and vulnerabilities that affect children in Zambia. It argues that risks and vulnerabilities vary according to age, gender and residence, among other things. Therefore it proposes a design of social protection interventions that would take into account the multiplicity of vulnerabilities in Zambia.

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INTRODUCTION

Over the past two decades or so social protection has dominated the literature on social policy and social development as well as development planning. For instance, Hall and Midgley (2004) assert that social protection is a social policy goal that emerged during the 1990s, while Barrientos and Hulme (2009) argue that social protection is increasingly being viewed as the emerging paradigm for social policy, especially in developing countries. This has been mainly because of its perceived potential to alleviate extreme poverty and vulnerability especially in developing countries (Barrientos, 2011) and to some considerable extent promoting social inclusion in society. However, this encouraging shift has often been concentrated on adult populations and formal sector citizens, while neglecting informal sector workers and children. Where efforts to cater for children have been put in place, they have tended to be minimal. For instance, the ILO (2015) reports that on average governments allocate only 0.4 percent of their Gross Domestic Product (GDP) to child benefits – with Africa, Asia and the Pacific countries allocating even less, averaging 0.2 percent of GDP.

Children are often assumed to benefit from social protection indirectly as household members, yet as this study established, it is this category that is most likely to suffer abuse and neglect and to be most in need of social protection. Therefore such minimal investments in the welfare of children jeopardises children's rights and negatively impacts on their future as well as the economic and social prospects of the countries in which they live (ILO, 2015). Disadvantages such as their young age, lack of power and limited rights make children dependent on others to meet their needs and ensure their general wellbeing (Mandell, 2008; Sabates-Wheeler & Roelen, 2011) by addressing poor nutrition, poor health care, abuse and exploitation.

Evidence around the world suggests that the disadvantages that children face can be mitigated to some considerable extent through child-sensitive social protection that addresses many aspects of poverty and vulnerability (see, for instance, UNICEF, 2012; Kaplan & Jones, 2013; ILO, 2015). Child-sensitive or child-responsive social protection is an approach to social protection that takes into account children's unique needs, problems, risks and vulnerabilities. It takes into account four aspects namely; *protecting* children or their household's income and consumption levels; *preventing* their possible vulnerability and exhaustion of their coping abilities; *promoting* their development and resilience; and *transforming* their role in society by addressing power imbalances and ensuring equity of opportunities (Kaplan & Jones, 2013). While the focus of this approach is on children, it does not negate the importance of their caregivers, households and the communities in which children live, as these contribute both to their wellbeing and their impairment. Child-sensitive social protection is grounded in early

intervention; a coherent legal framework; addressing the age- and gender-specific risks and vulnerabilities of children; making special provision to reach the most vulnerable children; helping children and their carers, especially women, to claim their rights; and facilitating their participation in decision making and strengthening the capacities of the state, communities and families to respect, protect and uphold rights (UNICEF, 2008).

In spite of the importance of the child-sensitive approach to social protection, there are a number of challenges in its design and implementation that tend to militate against its effectiveness. These can be categorised as governance and institutional, fiscal constraints, erosion of informal and traditional social protection mechanisms, and the extent of poverty (UNICEF, 2009). For instance, a country that has the political will to design and implement child-sensitive social protection may be constrained by fiscal scope or institutional fragmentation. Additionally, the extent of poverty may make such a social protection system appear ineffective.

The article is organised as follows: after conceptualising the notion of vulnerability, the various approaches to understanding vulnerability are examined. The prevalence of child vulnerability in all its facets is discussed, leading to greater understanding of vulnerable children. An attempt is then made to define social protection, including the nature of its re-emergence. The research design and methodology are presented, followed by a discussion of the findings, leading to conclusions and recommendations.

CONCEPTUALISATION OF VULNERABILITY

Although the term vulnerability is often used, the concept is becoming increasingly less conventional than common sense might suggest. It is often used by practitioners and politicians as well as scholars without being adequately defined. The assumption in this article is that “vulnerability” is as variable as social protection. As Brown (2011) noted, it means different things to different people. But there has been some attempt to circumscribe social protection, given the targeted nature of interventions associated with it. It would also make sense to specify what vulnerability entails and who the vulnerable children are.

Vulnerability refers to a state of weakness (Brown, 2011). According to the author, the term can be used in relation to something and also independently. In the former sense it relates to some particular thing such as a risk, for example, illness or having to live with a chronically ill person, suffering, poverty and infringement on rights. In the second case, it pertains to susceptibility. In relation to poverty, vulnerability means the “probability that a person, household or community will be in poverty in future” (Barrientos, 2011:242). The author argues that determining the likelihood of such events is difficult. Indeed, some contingencies such as accidents or natural disasters might plunge individuals, households or communities into poverty, either temporarily or permanently.

APPROACHES TO UNDERSTANDING VULNERABILITY

There are several approaches towards a better grasp of vulnerability.

HUMAN RIGHTS

Some view vulnerability as a *human rights* issue. For instance, Turner (2006) asserts that vulnerability is central to the attainment of human rights (cited in Brown, 2007). Turner (in Brown, 2007) explains that the concept has the potential to elicit sympathy and provide the basis for a “common moral community”. Additionally, when associated with rights, it entails limited access to inalienable rights which include rights to basic needs such as food and shelter. Therefore, from a rights perspective a person, and for this paper specifically a child, with limited access to resources to meet basic needs is considered vulnerable and therefore in need of social protection. In fact, the child’s right to social protection is spelled out in article 26 of the United Nations Convention on the Rights of the Child (UNCRC) (Voipio, 2012 cited in UNICEF, 2012). However, Brown (2011) has argued that “vulnerability can be at odds with rights” as it has a stigmatising effect on people referred to as “vulnerable”.

DEPENDENCY

Another approach to the vulnerability of children is through their actual *dependence* on others, especially adults, for their wellbeing and provision of their basic needs (Sabates-Wheeler & Roelen, 2011). This dependence predisposes children to becoming subject to vices such as abuse and neglect, thereby worsening their situation. Taking a moral view of vulnerability, Goodin (1985, cited in Brown, 2011), argues that vulnerability transcends people’s responsibility for their own circumstances when these are beyond their control, calling for a moral as well as societal duty to intervene. However, such an approach to vulnerability (which suggests helplessness) could potentially be harmful, as it suggests that the victims are helpless, even to the point of defining their problem or identifying their need(s). It reinforces the notion that such people “do not know what is best for them and require protection” (Brown, 2011:316). On the other hand, the social work profession recognises the “inherent worth” of a person, as well as the right to “self-determination”, among others (Biestek, 1991 cited in Adams, Dominelli & Payne, 2002), though within limits. These ideals are part of the social work values base. Additionally, by removing this somewhat limited responsibility from the person, there is a danger of defining problems and needs in practitioner terms, thereby creating a client-practitioner as opposed to a service user-service provider relationship that ensures empowerment and liberation of people as enshrined in contemporary social work practice.

INSTITUTIONALISED VULNERABILITIES

Institutionalisation is another approach to understanding vulnerability. Sometimes vulnerability emanates from institutions where people live or work. Institutions (be they formal or informal) define relationships among actors and this definition of interacting relationships may put those with less power in a vulnerable situation. In institutions such as work places or in families, one finds policies, hierarchical relationships and cultural

practices that may negatively affect some people's wellbeing (Mandell, 2008). In a family setting, for example, the adult-child relationship entails dependence, hence the vulnerability of the child. Additionally, the old cultural belief in some traditional societies that a girl child did not need to go to school, since she would be under someone else's care through marriage, has tended to be disadvantageous to females in terms of employment opportunities. It has also meant that they might have to endure oppressive marriage relationships because of dependence on their spouses. Similarly, in a service organisation the helper-helped (as opposed to service provider-service user) relationship portrays one group as powerful and the other as vulnerable (Mandell, 2008).

THE RISK-VULNERABILITY NEXUS

Vulnerability can also be understood in relation to risk, since it is neatly connected to risk, necessitating social protection. This risk means that some often incapacitating occurrences could require some interventions external to the victims, while their vulnerability suggests limited ability to deal with such occurrences (risk) or exposure to risk. Since risk is the likelihood of some adverse outcome resulting from some action or event (Baldock, Manning & Vickerstaff, 2007), often incapacitating victims, contingency measures are needed that would restore the victims' original functioning or at least ameliorate the consequences. However, given that not all risks are contingent, long-term and sustainable responses are required.

Social protection is thus considered to provide effective answers to the risk-vulnerability nexus and could help us to better understand the dynamic nature of poverty (Barrientos & Hulme, 2008). However, risk and vulnerability are not the only reasons for social protection and social welfare (and social protection is not responsive to all vulnerabilities) as various contingencies in the life cycle require insurance and redistribution. As Barr (2001:1) notes, "even if all poverty and social exclusion could be eliminated ... there would still be a need for institutions to enable people to insure themselves and to redistribute over the life cycle". This popular view does not mean that social protection should only be reactive. It should in fact be proactive, especially in the sphere of child welfare.

This paper narrows the focus of risk and vulnerability to child welfare, since children are at the core of human capital investment. As postulated in the human capital theory, the stock of investment in education and training for an individual or a group of them (Scott & Marshall, 2005) would result in higher net returns. The human capital theory suggests that individuals and society derive economic and social benefits from investments in people, especially in their education, both formal and informal (Sweetland, 1996) as well as promoting health and other aspects of wellbeing. However, education tends to be more prominent in this theory because its benefits can easily be determined from quantifiable investments.

The paper deviates from the traditional and general view of risk and vulnerability, often pertaining to economic and livelihood issues to include aspects of a social nature and the effects these have on children. This sub-group forms the largest part of the global poor (Barrientos & Niño-Zarazúa, 2011). Although orphanhood is one of the main markers of

child vulnerability (Akwara, Noubary, Ken, Johnson, Yates, Winfrey, Chandan, Mulenga, Kolker & Luo, 2010), the causes of vulnerability among children are many and varied, as discussed below.

PREVALENCE OF CHILD VULNERABILITIES

Children constitute more than a third of the population, particularly in developing countries (Gabel, 2012) and those under 15 years make up 42 percent of the population in Africa (ILO, 2015). Given this high percentage of children and the potential they present for the future, it is important to examine this phenomenon carefully. According to Gabel (2012), almost half of the poor in developing countries are children. Although most assessments and interventions on poverty focus on economic vulnerabilities (Bailey, 2010; Sabates-Wheeler, Devereux & Hodges, 2009), evidence shows that various social vulnerabilities in particular affect children. For instance, HIV/AIDS is associated with both social and economic vulnerabilities, thereby exacerbating the extent of vulnerability among children. This is because it kills the most productive age group, thereby affecting food security among the affected households in addition to increasing the number of orphans, elderly and young caregivers. But it is important to note that HIV/AIDS has tended to blind researchers, practitioners and politicians alike to other equally crucial vulnerabilities that affect children.

The literature surveyed for this study has revealed the prominence of HIV/AIDS as the core vulnerability marker, especially among children, yet child vulnerability was probably more pronounced before the emergence of HIV/AIDS.

Most social protection interventions tend to have an economic focus, because poverty is often defined in economic terms, for instance, earning wages of less than one dollar a day. Yet social protection focusing on economic issues such as asset or cash transfers might not be the best way to reduce vulnerability (Sabates-Wheeler & Roelen, 2011). Therefore, because HIV/AIDS is perceived to reduce the economic viability of households (owing to prolonged care and incapacitation of the income earner), it has tended to bear much weight in social protection systems through reducing economic shock. However, as has been argued in the previous section, vulnerability transcends HIV/AIDS; it transcends the inescapable lack of cash; it transcends gender; and it transcends age, although its impact on age groups varies. Social vulnerability is rarely taken into account, yet it can be “more important in terms of pushing and keeping households in poverty” (Jones, Tafere & Woldehanna, 2010:viii). These authors maintain that social rather than economic vulnerabilities or the sources thereof are more important barriers to sustainable livelihoods and general wellbeing.

VULNERABLE CHILDREN

According to UNICEF (2008), Eastern and Southern Africa were estimated to have 24 million orphans, 40 percent of whom had been orphaned through HIV/AIDS. Given that vulnerability is often associated with loss of one or both parents or caregiver, it would be safe to state that this region has many vulnerable children, especially when other risks such as armed conflict, droughts and floods are taken into account.

If both parents are dead and the children are not living with grandparents, they are less likely to be attending school (Akwara *et al.*, 2010). The authors also found that orphaned children are more likely to become sexually active before non-orphans do. While these are undoubtedly causes of vulnerability, they are by no means the only ones. A child born with a disability or from (a) parent(s) with a disability suffers even greater vulnerability. Similarly, a child born into a poor family is already vulnerable, given the limited means of subsistence in such a household. In other words, vulnerability tends to be passed on from one generation to another. For instance, Akwara *et al.* (2010:1077) found that “greater household wealth [and to a greater extent the parents’ or carer’s educational background] was significantly associated with better school attendance” and other important outcomes. In spite of this legacy, the vulnerability cycle can be broken by, for example, investment in child welfare, by way of child education and protection. This would require intervention by the state. This is supported by the human capital thesis, which states that “individuals and society derive more economic [and social] benefits from investing in people” (Sweetland, 1996:341) especially in children.

SOCIAL PROTECTION

Defining social protection poses a challenge not because it is a very technical concept, but because of its malleability. Its application in practice is often fit for purpose and context. Nonetheless, there is probably agreement that it is a system of measures to alleviate poverty, and to prevent and protect people against risk and vulnerability, and in so doing contribute to social development.

In different contexts social protection evokes a myriad of definitions ranging from response to contingencies, including providing assistance to meet *basic needs* (Devereux & Sabates-Wheeler, 2007; Munro, 2008), *effective management of social risks* (Barr, 2001, 2004; World Bank, 2000), and protecting *rights* (Ellis, Devereux & White, 2009; ILO, 2008; Munro, 2008; UNICEF, 2008; United Nations, 1989; Venter, 2002). For De Haan (2000, cited in Barrientos, Hulme & Shephard, 2005) social protection is the prevention and reduction of poverty as well as provision of support to the poorest. However, social protection has also been criticised for perpetuating income inequalities (Hall & Midgley, 2004). Generally, social protection can be understood as a system of public and voluntary measures and programmes designed to attenuate poverty, risk and vulnerability among people in a particular society. This definition holds that poverty, risks and vulnerabilities are diverse and therefore require some integrated measures, and involve a number of actors.

THE RE-EMERGENCE OF SOCIAL PROTECTION

Social protection is not as new as suggested by its current practice, which is predominantly cash-based. It dates back to the 1870s (Ramia, 2002), arising mainly as a result of the need for conservation of humanity and nature (Polanyi, 1944). Informal social protection has also existed since the dawn of human civilisation through traditional family and community networks. The distinctive features of this current version of social protection supply the link to economic and social development in

addition to preventing and alleviating extreme poverty through income (cash) transfers. This new development is based on the view of poverty as fundamentally being a lack of income or failure to “manage income risks” (Holzmann & Jørgenson, 1999).

The social protection agenda has been increasing in prominence since the turn of the century, mainly in response to rising poverty levels but also to changes in development practice dominated by providing income security and redistribution throughout the life cycle, especially among the most poor. Its major surge is said to have coincided with the decline in contractual freedom (Ramia, 2002). The great depression of the 1930s also necessitated the protection of people against economic shocks (Hoefer & Curry, 2011). However, the systematic study of social protection dates back to the first half of the 20th century (Midgley, 2013). Much of the research on social protection, however, has followed the risk management framework (Bailey, 2010), invariably a programme successor to the structural adjustment programmes (SAPs).

SAPs were International Monetary Fund (IMF) and World Bank measures intended to reinvigorate the depressed economies of especially developing countries in the 1980s and 1990s. These measures were intended to address reduction of subsidies on food, fuel and other essential commodities and retrenchments in public employment, among other things (Townsend, 2000). However, poverty levels in these countries increased during the structural adjustment era (Midgley & Tang, 2001), partly owing to massive losses of jobs. Although the social risk management (SRM) framework has several functions, it mainly focuses on averting and alleviating risk.

Following structural adjustment measures, the Zambian government established the first ever social recovery project in Africa and only the second in the world (Holmes, 2007) to cushion people against the negative impacts of the SAP. This was followed in part by the enactment of the Millennium Development Goals (MDGs) in 2000 to address poverty and vulnerability. However, social protection seems to have gained ground in Zambia after the humanitarian crises (droughts and floods) of 2002 and 2003 that affected food security in most of Southern Africa. During this period most people in the region were receiving relief food aid in addition to suffering the devastating impact of the HIV/AIDS crisis.

After these emergency operations (of relief food distributions), stakeholders began thinking of proactive and sustainable measures to address food crises as well as transient and chronic poverty as opposed to contingent risks and reactive responses to such crises. The Zambian government subsequently drafted the social protection strategy paper in 2005 to guide and coordinate social protection interventions for the poor (Holmes, 2007). The following year social protection was included in the Fifth National Development Plan (FNDP) 2006-2010 to signify a departure from short-term social funding and safety-net measures towards measures that would also promote and sustain growth.

This departure, coupled with an understanding of poverty as a basic lack of income as well as reports from other countries that income transfers are effective, led to the use of cash transfers to alleviate poverty and vulnerability among the poorest. The impact of

the 2008 global financial crisis seemed to have further justified the need to provide income maintenance to the poor. The first cash transfer pilot project (mainly donor driven) was officially implemented in 2004 in Kalomo District of Southern Province and later extended to a further five districts. Since then the cash transfer project has gained ground, rising from 19 districts in 2013 to an astonishing 50 districts in 2014, with 100 more planned for the following year (Ministry of Community Development, Mother and Child Health, 2014). The report also indicated that the government of Zambia had increased the budgetary allocation to this programme since 2013 by more than 700%. This increase means that the government was now contributing more funding to the programme than the donors. While this is an encouraging development, particularly for programme ownership and consequently sustainability, it also raises sustainability issues pertaining to political tenure and resource mobilisation, among others. The current economic crisis (where the country's currency is losing value against other currencies almost every week and prices for essential commodities are on the rise) indicates that the increase may not be sustainable. If sustainable, the amount received by beneficiaries would be negatively affected by inflation, thereby having little impact.

According to Rodrik (1997, 2001, cited in Barrientos & Hulme, 2009), another factor that has been crucial to the rise of social protection is globalisation. Globalisation does not only make countries share problems (such as climate change, HIV/AIDS and air pollution to mention but a few), it also makes them converge in averting and addressing these problems. This is supported by convergence theory, which assumes that countries at similar levels of economic development tend to design similar social protection systems (Wilensky, Luebbert, Hahn & Jamieson, 1985) to respond to their similar or shared problems.

RESEARCH DESIGN AND METHODOLOGY

This paper is based on the data analysed from an extensive literature review and qualitative study (Blaikie, 2009; Corbin & Strauss, 2008; Creswell, 2007) of social protection in Zambia with a focus on vulnerable children. The qualitative approach was used to elicit the experiences of practitioners on the subject. "Qualitative research allows researchers to discover the inner experience of participants to determine how meanings are formed through and in culture and to discover rather than test variables", as noted by Corbin and Strauss (2008:12).

Using a descriptive approach (De Vaus, 2001, 2002; De Vos, Strydom, Fouché & Delport, 2011), this paper examines the prevalent risks and vulnerabilities that affect children in Zambia and how social protection addresses them. The descriptive approach was used because social protection was less familiar in the country of study. According to De Vaus (2002:118), "descriptive research deals with questions of *what* (or how) things are like, not *why* they are that way". It also examines how social protection seeks to address these risks and vulnerabilities. Taking a transformative approach (Creswell, 2009), the article focuses on advancing the understanding of the links between risk, vulnerability and social protection with particular reference to vulnerable children.

DATA COLLECTION

Data collection involving 24 participants was done through a semi-structured interview schedule with open-ended questions. Semi-structured interviews involve “a set of preset questions for initiating the discussion, followed by further questions that arise from the discussion” (Rule & John, 2011:65), with the advantage of gaining clarification through further probing. There were four key participants from each province (two from government departments and two from NGOs involved in social protection in Zambia). Such officers are normally involved in both planning for and implementation of social protection programmes and other social services for vulnerable groups in their areas, hence their selection.

Five districts from each province in Zambia were also purposively selected (Bryman, 2008; Creswell, 2007, 2009; Silverman, 2005) for data collection. Purposive sampling is a nonprobability sampling method in which some people or objects have little or no chance of being selected (Bloch, cited in Seale, 2004), but are deemed to be rich sources of information on the subject in addition to being easily accessible to the researcher. From each district a social welfare officer in charge of the district was selected for an interview, subject to his/her consent. These were government officials placed in every province and district to implement social protection and other social services for vulnerable groups in Zambia, hence their selection. Three typical carers of vulnerable children were also interviewed from each province to learn about their experiences in social protection delivery. In this study “carers” refers to any person of any age and gender who provides unpaid daily support to a child or children. These could be, but were not restricted to, biological parents.

DATA ANALYSIS

De Vaus (2001) states that one way of constructing a description is to use *ideal types*. He argues that the use of ideal types provides a way of looking at and organising the analysis of the descriptions, rendering the description structured, planned and purposeful. Based on the size of the purposive sample and the descriptive nature of the study, the findings have limited generalisability (Creswell, 2009; Lincoln & Guba, 1985). They are nonetheless worth reporting as they suggest that there is need for social protection of this sub-group even more than HIV/AIDS required, adding to an already long list of factors affecting child welfare, especially in Sub-Saharan Africa. Children themselves were not research participants, because the subject was considered too technical for their participation.

DISCUSSION OF FINDINGS

This study focused on the risks and vulnerabilities that affected children at the time of the study, taking into consideration that risks and vulnerabilities vary in space and time. For instance, some of the risks that affect children in developing countries, such as neglect and abuse, may not be so pronounced in the developed countries where there are strong social and child protection mechanisms. However, there are those risks that affect children in developed countries more than in developing ones as well as those that occur everywhere, such as HIV/AIDS.

Data for this study were collected from 24 study participants (n=24) drawn from three provinces: Central, Lusaka and Southern provinces conveniently sampled. Table 1 below shows the categories and number of study participants. However, the five carers (all women) were only drawn from the Central (two) and Southern (three) provinces because of time limitations. Social welfare officers (9) were drawn from the Central and Southern provinces, although two participants came from Southern Provinces. All the interviews were recorded, except for the two Social Welfare Officers, who opted not to have their interviews recorded. Nonetheless all transcripts were used for data analysis. As Table 1 below shows, only three from this group were men, possibly indicating the dominance of women in social work.

TABLE 1
PARTICIPANTS IN THE STUDY

No	Gender	Designation	Province
1	Male	Social welfare officers	Southern
2	Female		
3	Female		
4	Female		
5	Female	Social welfare officers	Central
6	Female		
7	Female		
8	Female		
9	Male	Key informants – government	Central
10	Male		
11	Male	Key informants – government	Lusaka
12	Male		
13	Male		
14	Female	Key informants – NGOs	Lusaka
15	Female		
16	Male		
17	Male	Carers	Southern
18	Female		
19	Female		
20	Female		
21	Female	Carers	Central
22	Female		
23	Female		
24	Female		

Source: Field data

It is also important to note that the avoidance of some risks tends to breed new ones. For instance, advances in information communication technology (ICT) puts children at risk of cyber and other related crimes (Lewis, Miller & Buchalter, 2009). Similarly, trying to reduce the impact of HIV/AIDS by targeting social protection interventions at HIV-affected children may run the risk of stigmatising such children. Of course, some of the

risks that affected children in the 20th century may not affect a similar age group in the 21st century.

This study also sought to find out how the participants and their organisations were addressing the risks and why they particularly focused on those types of risks and vulnerabilities. In effect it sought to explore which types of social protection interventions were being implemented to address the risks and vulnerabilities affecting children. In so doing, it attempted to determine the appropriateness and effectiveness of such interventions in responding to risks and vulnerabilities.

THE MEANING OF SOCIAL PROTECTION

The participants had different understandings of social protection, ranging from making provision for basic needs and implementation of services or activities, to interventions for vulnerable people in order to alleviate their suffering, to safety nets that prevent or cushion vulnerability among people. For instance, some study participants noted the following:

*“I would say social protection is ... one way that provides ... the **basic needs for the poor.**”*

*“... services or activities that are implemented to ... in order to **alleviate** the sufferings of the **vulnerable people**. Like for example the measures or the programmes that can be put or be implemented [for] those people that can be helped to move out of their category and be able to do something for their lives.”*

*“Programmes or interventions put in place by either **government** or **stakeholders** just to **cushion** the effects of, you know, hardships of the **vulnerable members of society.**”*

Others understood it differently:

*“a **system** which is there to safeguard certain people who cannot meet certain basic needs for instance ... people that are not employed and they cannot meet certain basic needs for instance ... food, education ... a country can put in place a system which is going to assist those people attain those needs.”*

*“[A] set of **policies, programmes** or even **actions** with the objective of **preventing and protecting** against what I call the right for economic and social types of **vulnerability** and then vulnerability to poverty and deprivation.”*

What was commonly observed, however, was the idea that social protection is not a comprehensive system of assistance, but is some kind of “help” [sic] to the needy, offered either by government or the private and voluntary sectors through a range of “programmes” and interventions. It is some targeted mechanism for “alleviating poverty”, especially among the “poorest”, although a few participants also considered it a right. From these perspectives, therefore, social protection in Zambia is defined in its narrower sense of focusing on social assistance.

RISKS AND VULNERABILITIES THAT AFFECT CHILDREN

Any social protection system would also focus on poverty alleviation, preventing or reducing risk and vulnerability as well as insuring people against these over a life cycle. As directed by UNICEF (2008:9), “a successful social protection strategy responds to the risks and vulnerabilities affecting the population; a child-sensitive social protection strategy will emphasise poverty, risk and vulnerabilities that explicitly affect children”. Emphasis is placed on children in this paper because they are considered a more vulnerable sub-group mainly because of their dependence on adults.

Risks and vulnerabilities that affect children are often mutually reinforcing. They can be broadly divided into *economic* and *social* aspects (UNICEF, 2008). Economic aspects pertain to those conditions that destabilise economic wellbeing or limit access to economic opportunities and even access to resources for meeting basic needs. Social aspects refer to vulnerabilities that result when certain groups and sub-groups in society are disadvantaged and ultimately excluded from life-time opportunities as a result of certain social structures. Such disadvantages are often embedded in societal institutions and they include political and cultural decisions as well as power relations. For example, limited access to certain opportunities like education result from prohibitive policies (political) and cultural practices, such as male over female preference.

HIV AND AIDS

This study found that there are various risks and vulnerabilities that affected children but also that vulnerability varied across age groups, gender and residence. According to participants, HIV/AIDS and consequently orphanhood featured quite prominently in both rural and urban areas and cut across gender and age groups: “... *number one I think is the pandemic, HIV/AIDS, because when parents die, children become vulnerable*”. HIV and AIDS present economic and social risks and vulnerabilities but also co-vary. According to UNICEF (2008), AIDS causes a decline in household income while at the same time increasing expenditure on health care. The social effect mainly manifests in stress caused by long-term care of the patients.

POVERTY

Piven and Cloward (1978, cited in Belcher & Tice, 2013:83) observe that the history of social work reflects a longstanding commitment to addressing poverty and the issues associated with it. A number of surveys in Zambia – namely Central Statistics Office (2004, 2011, 2012), Holmes (2007) and Vulnerability Assessments (2006) – have established that there is more poverty in rural areas than in urban areas. However, the effects of HIV/AIDS seem to be more severe in urban areas, where family networks are a bit weaker when compared to rural areas with their traditional, stronger care networks, especially when it comes to taking care of children when parents die.

ACCESS TO RESOURCES FOR BASIC NEEDS

Access to resources for meeting basic needs such as for food, shelter and health care was also found to be a challenge. The effects of poverty lead to, among other things, stunted growth as a result of poor nutrition, consequently affecting cognitive development among children. One interviewee noted that stunting as a result of poor nutrition is often a hidden problem, given that some people are naturally short:

*“Perhaps the **biggest violence** to children’s rights is **stunted growth** which is about forty-seven percent ... one in two children is having **their cognitive development** affected through ... not getting **adequate nutrition** therefore likely to **learn less, earn significantly less** when they are adults and be more **vulnerable** to disease when they are adults. And this is almost a **hidden crisis** because most people do not really fully understand [that a] child is small ... because they haven’t been getting the **right nutrients**. As they are small their brain has not developed in the full way that will make them **realise their full potential**....”*

Another interviewee noted that *“they are too short and that is a risk for their development....”*

“... so many cases of children being defiled ... child abuse if you like, ... too many cases involving the abuse of children....”

CHILD NEGLECT AND ABUSE

Some risks are more prominent in rural than urban areas, while others are found in both with equal severity, for instance *child abuse* and *child labour*. The latter sometimes happens in the process of training children either in family concerns or institutions especially in rural areas. In the rural areas it is quite unusual to find street children, while this is a common problem in urban areas: *“...the problem of children on the street not necessarily street children but children on the street....”*

Again this can be attributed to weakened extended family systems in urban areas. The concentration of NGOs in urban areas has tended to result in duplication of assistance and poor coverage in the redistribution of resources.

Although there are risks and vulnerabilities that commonly affect children as argued above, there are also those that are age- and gender-specific: *“... for the girl children the risks are even worse. They are at risk of being raped, defiled, having early pregnancies, exposure to disease, STI and HIV/AIDS....”*

In fact, UNICEF (2008) found that the “main risks and vulnerabilities that affect children vary by age and sex”. It found that mortality, malnutrition and reduced or delayed cognitive development were more associated with the 0- to 5-year-olds, while abuse and unemployment were more associated with those above the age of 5 years. Social protection interventions need to take into account this unfortunate reality if they are to be responsive to these risks and vulnerabilities that affect children.

FEMALE-HEADED HOUSEHOLDS

It is ironic that after decades of gender activism, a household is considered vulnerable by virtue of being headed by a female. This is consistent with other studies, for instance, by Schenk, Ndhlovu, Tembo, Nsune, Nkhata, Walusiku and Watts (2008). Similarly Patel, Hochfeld and Moodley (2013) documented that most of the recipients of social protection benefits (invariably vulnerable people) are females. Ideally what should count is the economic participation of the heads of households, not whether or not they are female. What is encouraging, though, is that benefits received by females had a greater impact on alleviating child hunger than those received by males (Adato & Basset, 2009) “and the redistributive effects of social grants is significantly stronger when the grant goes to a female recipient” (Dufflo, 2003, cited in Patel *et al.*, 2013:71).

RISKS ADDRESSED BY SERVICE PROVIDERS

Both government and carers including civil society and faith-based organisations in Zambia make tremendous efforts to address all the risks faced by vulnerable children, although sometimes not so effectively. There is, however, particular focus on issues of child abuse in many of its forms, especially defilement, which has sometimes evoked “knee-jerk” reactions among some advocacy groups instead of getting to the root of the problem. Attention is also paid to the education of children as well as to poverty alleviation among children. But again, it is often assumed that through assisting the family the child would indirectly benefit (“... *the idea is that all these risks will be addressed because as it trickles down to the family, you’ll have a child who is protected and safeguarded...*”).

Some participants felt that they were addressing a composite of all the risks and vulnerabilities that affected children in some way, since most of the risks and vulnerabilities are interrelated.

“We address poverty, child abuse, human trafficking everything else.”

“We assist government to address all the risks....”

“Of course poverty maybe is a priority and education support. We address those so much because the life of a child depends on, on first of all on its survival depends on food, shelter and all those and that’s why there is need to provide food through transfers and through PWAS. Then education support is about the future of the child.”

For instance, when parents die, children become vulnerable. Forster, Levine and Williamson (2005), and Hunter and Williamson (2004, cited in Akwara *et al.*, 2010) observed that loss of parents through HIV and AIDS renders children vulnerable to food insecurity, leaving school and many other problems. Dropping out of school would also have long-term implications for a child’s welfare and lead to poverty. Similarly, early marriages would affect a child’s development and later employment prospects, which could result in poverty.

Having reflected on the varied nature of risks and vulnerabilities, it is expected that the responses would also be variable and attended to by specialised agencies through established referral systems.

RATIONALE FOR ADDRESSING PARTICULAR RISKS

Certain risks and vulnerabilities have the capacity to breed even more risks. For instance, poverty and dropping out of school could have far-reaching consequences for children later in life and could even result in their being exposed to several other vulnerabilities such as lack of access to resources for meeting basic needs. There is a recognised need to focus on those vulnerabilities. Also, while early prevention is important, it is also necessary to focus on protection, as one participant stated:

“Our job is to protect, it’s one of our job descriptions to protect children; that’s why we are called juvenile inspectors.”

Therefore, both social protection and child protection are important in ensuring that the risks and vulnerabilities of children are averted. According to Webb (2006, cited in Becker, Bryman & Ferguson, 2012), child protection is becoming increasingly defined in terms of risk. This, according to Ferguson (2004, cited in Becker *et al.*, 2012), refers not only to attempts to protect children at risk, but also to avert the risk of professionals and professional systems failing to protect children, or even abusing children in the process of trying to protect them.

CONCLUSIONS AND RECOMMENDATIONS

The conclusions from these findings are that social protection addresses most of the risks and vulnerabilities of children and in so doing enhances investment in human capital. It avails itself of most of the resources and rights such as health care and education that are required for children’s complete development. However, the design of social protection systems, especially for the sub-group under discussion, needs to take into account the multiple approaches to vulnerability as well as the contextual factors that bring about and perpetuate vulnerabilities. As Sabates-Wheeler and Roelen (2011) have argued, “recognizing vulnerability as being embedded into social institutions and structures takes us squarely into considerations of justice”. As such, social protection goes beyond enabling access to resources for meeting basic needs, but also promotes social justice in society by reducing social exclusion. Furthermore, a social protection system that is responsive to the needs of children requires, among other things, early, coordinated and multifaceted interventions that take into account the diverse and specific nature of children’s needs and problems.

The HIV/AIDS pandemic (a huge risk not only to children) incapacitates households, especially economically, hence the need for economic and social protection. In spite of this reality, targeting children on the basis of their vulnerability to HIV/AIDS or disability tends actually to make them vulnerable to being stigmatised. Nonetheless, recognising children, especially vulnerable children, as a distinct sub-group would

improve programming tailored towards their addressing needs, risks and vulnerabilities.

The extended family system has for a long time assumed the responsibility of taking care of vulnerable children, especially orphans. However, increasing urbanisation has posed a new risk to this arrangement, given the weakened extended family systems in urban areas. The need for formal interventions such as social protection provided by governmental and non-governmental organisations in such areas is thus emphasised. Such interventions need to be complementary and based on evidence as well as on the existing administrative and fiscal capacities of the implementers.

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